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APPLICANTS

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** CONTINUING DATA ***** *cm*
 This appln claims benefit of 60/011,282 02/07/1996

** FOREIGN APPLICATIONS ***** *cm*

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>cm</i>	STATE OR COUNTRY FRANCE	SHEETS DRAWING 1	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 2
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TITLE
 LHRH-ANTAGONISTS IN THE TREATMENT OF FERTILITY DISORDERS

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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